

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000021334

Entity Name: PHYSICIAN'S ACCOUNT MANAGER, INCORPORATED

Current Principal Place of Business:

1907 ATLANTIC BLVD
JACKSONVILLE, FL 32207

Current Mailing Address:

1907 ATLANTIC BLVD
JACKSONVILLE, FL 32207 US

FEI Number: 59-3168901

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRAWFORD, JOHN R
1200 RIVERPLACE BOULEVARD
SUITE 800
JACKSONVILLE, FL 32207 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DCEO
Name BARAKAT, BRIGITTE
Address 4000 ST JOHNS AVE STE 13A
City-State-Zip: JACKSONVILLE FL 32205

Title P
Name BARAKAT, HAISSAM
Address 4000 ST JOHN AVE STE 13A
City-State-Zip: JACKSONVILLE FL 32205

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HAISSAM BARAKAT

PRESIDENT

04/29/2015

Electronic Signature of Signing Officer/Director Detail

Date